

DRAFT JUNE 23, 1998

## PROGRAM OF REQUIREMENTS

[Name of Health Facility]

[Location], [State]

[Month] [Year]

INDIAN HEALTH SERVICE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

DRAFT JUNE 23, 1998

PROGRAM OF REQUIREMENTS  
INDIAN HEALTH SERVICE  
[Name of Health Facility]  
[Location], [State]

RECOMMEND APPROVAL:

\_\_\_\_\_  
[Name]  
[Assistant Surgeon General] {If applicable}  
Director  
[Area Name] Area Indian Health Service

\_\_\_\_\_  
Date

RECOMMEND APPROVAL:

\_\_\_\_\_  
[Name]  
[Assistant Surgeon General] {If applicable}  
Director  
Engineering Services - [Dallas or Seattle]  
Office of Environmental Health and Engineering  
Indian Health Service

\_\_\_\_\_  
Date

RECOMMEND APPROVAL:

\_\_\_\_\_  
[Name]  
Director  
Division of Facilities Planning and Construction  
Office of Environmental Health and Engineering  
Indian Health Service

\_\_\_\_\_  
Date

APPROVE:

\_\_\_\_\_  
[Name]  
[Assistant Surgeon General] {If applicable}  
Associate Director  
Office of Environmental Health and Engineering  
Indian Health Service

\_\_\_\_\_  
Date

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**I. PROJECT INTRODUCTION.** This document defines the design and construction requirements for the [new/replacement/renovated] Indian Health Service (IHS) [name of health facility], and staff quarters {if applicable} located in [location], [state].

**II. PROJECT EXECUTIVE SUMMARY**

**A. SITE.** {Give the description of the proposed site for the project, identifying the location, county, and state. Refer to the applicable Site Selection and Evaluation Report Phase I or II, that has been approved, as containing the legal description, metes and bounds description, and a site plan for the project.}

**B. GROSS AREA ESTIMATE**

**1. Health Facility Building.** The estimated Building Gross Area for the health facility is [amount] square meters (m<sup>2</sup>).

**2. Staff Quarters.** The estimated total gross area for the proposed [number] staff quarters is [amount] m<sup>2</sup>.

**C. PROJECT SCHEDULE**

| SCHEDULE ITEMS    | NUMBER OF MONTHS |                |
|-------------------|------------------|----------------|
|                   | HEALTH FACILITY  | STAFF QUARTERS |
| Design time       | [Number]         | [Number]       |
| Bid time          | [Number]         | [Number]       |
| Construction time | [Number]         | [Number]       |

**D. COST ESTIMATE.** The cost estimate is based on the IHS Budget Cost Estimating System, which is updated annually and/or as required throughout the project time. Below is a summary of the current estimate for this project, as prepared by the Director, Engineering Services - [Dallas or Seattle], Office of Environmental Health and Engineering, IHS.

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| PORTION OF PROJECT | DESIGN<br>(\$000) | CONSTRUCTION<br>& EQUIPMENT<br>(\$000) | TOTAL<br>(\$000) |
|--------------------|-------------------|--|------------------|
| Health Facility    |                   |  |                  |
| Staff Quarters     |                   |  |                  |
| Total Project      |                   |  |                  |

**E. STAFFING REQUIREMENTS.** The staffing requirements for this project were established based on the application of the IHS Resource Requirements Methodology (RRM), as they apply to this health facility, and are reflected in the approved Program Justification Document. Approved are [number] FTEs for IHS employees and [number] for tribal programs. Below is a summary of the approved staffing requirements:

| <u>Department</u><br><u>Number</u> | <u>Department Name</u>                              | <u>Current</u><br><u>Authorized</u><br><u>Positions</u> | <u>Additional</u><br><u>Required</u><br><u>Positions</u> | <u>Total RRM</u><br><u>Requirement</u> |
|------------------------------------|---|---|--|--|
| 11.0                               | Acute Care Nursing -<br>General<br>Medical/Surgical | [No.]   | [No.]  | [No.]                                  |
| 11.0                               | Acute Care Nursing -<br>Pediatric                   | [No.]   | [No.]  | [No.]                                  |
| 11.0                               | Acute Care Nursing -<br>Obstetrical                 | [No.]   | [No.]  | [No.]                                  |
| 12.0                               | Nursery   | [No.]   | [No.]  | [No.]                                  |
| 13.0                               | Intensive Care/Coronary<br>Care/ Step-Down Unit     | [No.]   | [No.]  | [No.]                                  |
| 14.0                               | Surgery   | [No.]   | [No.]  | [No.]                                  |
| 15.0                               | Labor/Delivery                                      | [No.]   | [No.]  | [No.]                                  |
| 16.0                               | Substance Abuse<br>Treatment                        | [No.]   | [No.]  | [No.]                                  |
| 17.0                               | Psychiatric Nursing                                 | [No.]   | [No.]  | [No.]                                  |
| 18.0                               | Short Stay Nursing Unit                             | [No.]   | [No.]  | [No.]                                  |



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| <u>Department</u><br><u>Number</u> | <u>Department Name</u>                 | <u>Current</u><br><u>Authorized</u><br><u>Positions</u> | <u>Additional</u><br><u>Required</u><br><u>Positions</u> | <u>Total RRM</u><br><u>Requirement</u> |
|------------------------------------|--|---|--|--|
| 21.0                               | Laboratory                             | [No.]   | [No.]  | [No.]                                  |
| 22.0                               | Radiology - Diagnostic Imaging         | [No.]   | [No.]  | [No.]                                  |
| 31.0                               | Emergency and Urgent Care              | [No.]   | [No.]  | [No.]                                  |
| 32.0                               | Ambulatory Care - Medical Care Module  | [No.]   | [No.]  | [No.]                                  |
| 32.0                               | Ambulatory Care - Eye Care Module      | [No.]   | [No.]  | [No.]                                  |
| 32.0                               | Ambulatory Care - Audiology/ENT Module | [No.]   | [No.]  | [No.]                                  |
| 33.0                               | Community Health Services              | [No.]   | [No.]  | [No.]                                  |
| 33.0                               | Mental Health Services                 | [No.]   | [No.]  | [No.]                                  |
| 34.0                               | Dental Clinic                          | [No.]   | [No.]  | [No.]                                  |
| 35.0                               | Pharmacy                               | [No.]   | [No.]  | [No.]                                  |
| 36.0                               | Physical Therapy                       | [No.]   | [No.]  | [No.]                                  |
| 37.0                               | Respiratory Therapy                    | [No.]   | [No.]  | [No.]                                  |
| 39.0                               | Dialysis Treatment                     | [No.]   | [No.]  | [No.]                                  |
| 41.0                               | Administration                         | [No.]   | [No.]  | [No.]                                  |
| 42.0                               | Medical Records Unit                   | [No.]   | [No.]  | [No.]                                  |
| 43.0                               | Employee Facilities                    | [No.]   | [No.]  | [No.]                                  |
| 44.0                               | Education and Group Consultation       | [No.]   | [No.]  | [No.]                                  |
| 45.0                               | Public Facilities                      | [No.]   | [No.]  | [No.]                                  |
| 46.0                               | Business Office Unit                   | [No.]   | [No.]  | [No.]                                  |
| 51.0                               | Medical Supply Services                | [No.]   | [No.]  | [No.]                                  |

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| <u>Department</u><br><u>Number</u> | <u>Department Name</u>   | <u>Current</u><br><u>Authorized</u><br><u>Positions</u> | <u>Additional</u><br><u>Required</u><br><u>Positions</u> | <u>Total RRM</u><br><u>Requirement</u> |
|------------------------------------|--------------------------|---|--|--|
| 52.0                               | Property and Supply Unit | [No.]   | [No.]  | [No.]                                  |
| 53.0                               | Dietetics Unit           | [No.]   | [No.]  | [No.]                                  |
| 54.0                               | Housekeeping Unit        | [No.]   | [No.]  | [No.]                                  |
| 55.0                               | Facilities Management    | [No.]   | [No.]  | [No.]                                  |
| 56.0                               | Building Services        | [No.]   | [No.]  | [No.]                                  |
| 57.0                               | Clinical Engineering     | [No.]   | [No.]  | [No.]                                  |
| TOTAL                              |                          | [No.]   | [No.]  | [No.]                                  |

### III. HEALTH CARE FACILITY

#### A. INTRODUCTION

This document is intended to define the design and construction requirements for the [new/replacement/renovated] Indian Health Service (IHS) [name of health facility], and staff quarters {if applicable} located in [location], [state]. The total Gross Building Area of the health care facility portion of the project is [number] square meters.

The health care facility will provide space for comprehensive educative, preventive, curative and rehabilitative health service programs to meet the needs of the [name] Service [Unit/Area] population. The health care facility will contain a full-range of ambulatory care services and a comprehensive community health services program. [Describe any special programs that will be provided at this facility.]

The acute care program {for hospitals only} will consist of [number] beds: [number] in Medical/Surgical, [number] in Pediatric, [number] in Obstetrical, [number] in ICU/CCU, and {Include number of beds for other programs such as Substance Abuse and Psychiatric Nursing, if there programs have been authorized.}

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The August 1989 edition of the IHS Health Facilities Planning Manual, Vol. 1 (HFPM) was used to identify requirements for all departments in the health care facility. The functional diagrams are provided to show interdepartmental and intradepartmental relationships.

The architecture for the health care facility is to reflect the prescribed programs, considering input from the using community. However, the predominant direction for the project will be the proper consideration of the functional, energy conservation and budgetary needs.

## B. SPACE SUMMARY

1. **Building.** The following is a summary of the gross area estimates for the health care facility. It is anticipated that the total building gross area for the health care facility will not exceed [Number] square meters; however, since these are estimates, the areas within individual departments may vary. See Space Schedule, subpart for Building, for specific departmental space criteria, planning, and computations.

| <u>Department</u>         |   | Department<br>Net Area | Department<br>Net-to-Gross<br>Conversion | Department<br>Gross Area |
|---------------------------|---|------------------------|--|--------------------------|
| <u>Number</u>             | <u>Name</u>   | <u>(DNA)</u>           | <u>Factor</u>                            | <u>(DGA)</u>             |
| <u>INPATIENT SERVICES</u> |   |                        |  |                          |
| 11.0                      | Acute Care Nursing-<br>General Medical/<br>Surgical | <u>  []  </u>          | x 1.50                                   | <u>  []  </u>            |
| 11.0                      | Acute Care Nursing-<br>Pediatric                    | <u>  []  </u>          | x 1.50                                   | <u>  []  </u>            |
| 11.0                      | Acute Care Nursing-<br>Obstetrical                  | <u>  []  </u>          | x 1.50                                   | <u>  []  </u>            |
| 12.0                      | Nursery   | <u>  []  </u>          | x 1.45                                   | <u>  []  </u>            |
| 13.0                      | Intensive Care/<br>Coronary Care/<br>Step-down      | <u>  []  </u>          | x 1.55                                   | <u>  []  </u>            |

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|                            |  |                   |        |                   |
|----------------------------|--|-------------------|--------|-------------------|
| 14.0                       | Surgery                                  | <u>    []    </u> | x 1.55 | <u>    []    </u> |
| 15.0                       | Labor/Delivery                           | <u>    []    </u> | x 1.55 | <u>    []    </u> |
| 16.0                       | Substance Abuse<br>Treatment             | <u>    []    </u> | x 1.25 | <u>    []    </u> |
| 17.0                       | Psychiatric Nursing                      | <u>    []    </u> | x 1.25 | <u>    []    </u> |
| 18.0                       | Short Stay Nursing                       | <u>    []    </u> | x 1.25 | <u>    []    </u> |
| SUBTOTAL                   |  | <u>    []    </u> |        | <u>    []    </u> |
| <u>DIAGNOSTIC SERVICES</u> |  |                   |        |                   |
| 21.0                       | Laboratory                               | <u>    []    </u> | x 1.30 | <u>    []    </u> |
| 22.0                       | Radiology - Diagnostic<br>Imaging        | <u>    []    </u> | x 1.45 | <u>    []    </u> |
| SUBTOTAL                   |  | <u>    []    </u> |        | <u>    []    </u> |
| <u>AMBULATORY SERVICES</u> |  |                   |        |                   |
| 31.0                       | Emergency and<br>Urgent Care             | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 32.0                       | Ambulatory Care-<br>Medical Care Module  | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 32.0                       | Ambulatory Care-<br>Eye Care Module      | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 32.0                       | Ambulatory Care-<br>Audiology/ENT Module | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 33.0                       | Community Health<br>Services             | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 33.0                       | Mental Health Services                   | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 33.0                       | Environmental Health<br>Services         | <u>    []    </u> | x 1.35 | <u>    []    </u> |
| 34.0                       | Dental Clinic                            | <u>    []    </u> | x 1.30 | <u>    []    </u> |

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|          |                     |                   |        |                   |
|----------|---------------------|-------------------|--------|-------------------|
| 35.0     | Pharmacy            | <u>    []    </u> | x 1.25 | <u>    []    </u> |
| 36.0     | Physical Therapy    | <u>    []    </u> | x 1.30 | <u>    []    </u> |
| 37.0     | Respiratory Therapy | <u>    []    </u> | x 1.30 | <u>    []    </u> |
| 39.0     | Dialysis Treatment  | <u>    []    </u> | x 1.25 | <u>    []    </u> |
| SUBTOTAL |                     | <u>    []    </u> |        | <u>    []    </u> |

ADMINISTRATIVE SERVICES

|          |                                     |                   |        |                   |
|----------|-------------------------------------|-------------------|--------|-------------------|
| 41.0     | Administration                      | <u>    []    </u> | x 1.25 | <u>    []    </u> |
| 42.0     | Medical Records                     | <u>    []    </u> | x 1.20 | <u>    []    </u> |
| 43.0     | Employee Facilities                 | <u>    []    </u> | x 1.15 | <u>    []    </u> |
| 44.0     | Education and Group<br>Consultation | <u>    []    </u> | x 1.15 | <u>    []    </u> |
| 45.0     | Public Facilities                   | <u>    []    </u> | x 1.15 | <u>    []    </u> |
| 46.0     | Business Office Unit                | <u>    []    </u> | x 1.20 | <u>    []    </u> |
| SUBTOTAL |                                     | <u>    []    </u> |        | <u>    []    </u> |

SUPPORT FACILITIES

|      |                             |                   |        |                   |
|------|-----------------------------|-------------------|--------|-------------------|
| 51.0 | Medical Supply<br>Services  | <u>    []    </u> | x 1.15 | <u>    []    </u> |
| 52.0 | Property and Supply<br>Unit | <u>    []    </u> | x 1.10 | <u>    []    </u> |
| 53.0 | Dietetics Unit              | <u>    []    </u> | x 1.20 | <u>    []    </u> |
| 54.0 | Housekeeping Unit           | <u>    []    </u> | x 1.05 | <u>    []    </u> |
| 55.0 | Facilities Management       | <u>    []    </u> | x 1.15 | <u>    []    </u> |
| 56.0 | Building Services           | <u>    []    </u> | x 1.10 | <u>    []    </u> |
| 57.0 | Clinical Engineering        | <u>    []    </u> | x 1.15 | <u>    []    </u> |

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|  |                 |                 |
|--|-----------------|-----------------|
| SUBTOTAL   | _____ [ ] _____ | _____ [ ] _____ |
| TOTAL GROSS AREA ALL SERVICES (DEPARTMENTS) (TDGA) | _____ [ ] _____ | _____ [ ] _____ |

**GROSS AREA SUMMARY**

| <u>SERVICES</u> | <u>DEPARTMENT<br/>NET AREA<br/>(m<sup>2</sup>)</u> | <u>DEPARTMENT<br/>GROSS AREA<br/>(m<sup>2</sup>)</u> |
|-----------------|--|--|
| Inpatient       | [No.]  | [No.]  |
| Diagnostic      | [No.]  | [No.]  |
| Ambulatory      | [No.]  | [No.]  |
| Administrative  | [No.]  | [No.]  |
| Support         | [No.]  | [No.]  |
| Total           | [No.]  | [No.]  |

Total Department Gross Area (TDGA) = [No.]

Total Floor Gross Area (TFGA) = TDGA x [No.] = [No.]  
(Appropriate Floor Multiplier)

Vestibules (V) = [No.] Percent x TFGA = [No.]

Mechanical Space (MS) = 0.12 x TFGA = [No.]

Interstitial Space (IS) {if specifically approved} = [No.]

Building Gross Area (BGA) = TFGA + V + MS + IS = [No.]

**2. Other.** The following identified components of the health care facility are excluded from the building gross area computations but are to be design and constructed within the authorized space show below. See the Space Schedule, subpart for Other, for specific computations.

- |                             |     |
|-----------------------------|-----|
| a. <u>Cooling Tower(s).</u> | [ ] |
| b. <u>Loading Dock(s).</u>  | [ ] |

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- c. Exterior-covered walkways, canopied area(s), trellis-type cover(s), and other covered but not enclosed area(s). [    ]
- d. Parking Spaces
  - (1) Staff. [    ]
  - (2) Patients and Visitors. [    ]
  - (3) Government Vehicles. [    ]
  - (4) Other Vehicles (Bus, etc.). [    ]
- e. Uncovered outside storage area(s). [    ]
- f. Helicopter (port/pad). [    ]
- g. Building overhang(s) exceeding one meter in width. [    ]
- h. Unroofed equipment pad(s). [    ]
- i. Covered entrances(s). [    ]
- j. Outdoor Waiting Area(s). [    ]
- k. Traditional Healing Structure.  
(For inpatient health care facility only, as locally specified.) [    ]

**C. SPACE SCHEDULE**

1. **Building.** For the health care facility, the following departmental computations show for each department the concept of operation, design notes, staff requirements, space allocation, and inter/intra departmental relationships.

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2. Other. For the following identified components of the health care facility, which are excluded from the building gross area computations, the below computations are provided. If not applicable to the facility being planned, list the item and indicate as not being applicable.

a. Cooling Tower(s). Cooling towers are to be provided as required for the calculated air conditioning load for the health care facility. The actual sizes are to be reported.

b. Loading Dock(s).

(1) Service Index Computation:

A. Projected Number of Inpatient Beds \_\_\_\_ x 1.1 = [ ]

B. Projected Number of Outpatient Visits \_\_\_\_ x 0.0005 = [ ]

C. Service Index = A + B = [ ]

(2) Space computation: [ ]

{Use space allocation planning criteria specified in the IHS Health Facilities Planning Manual (HFPM) to determine loading dock space, without or with an arctic enclosure.}

c. Exterior-covered walkways, canopied area(s), trellis-type cover(s), and other covered but not enclosed area(s).  
[ ]

d. Parking Spaces. Separate parking spaces are to be provided for: (1) staff, (2) patients and visitors, (3) Government vehicles, and (4) buses and other special purpose vehicles. The Government vehicles parking area is to be located to the rear and adjacent to the health facility in close proximity to the Community Health Services staff entrance.

(1) Staff

A. Proposed facility staff = [ ]

B. Daytime staff

For inpatient facility (hospital): A x 0.8 = [ ]

or



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For outpatient facility (health center):  $A \times 0.95 =$  [ ]

C. Car pooling (assume 75 percent drive their own car):  
 $B \times 0.75 =$  [ ]

D. If staff quarters are within  $\frac{1}{2}$  mile of health care facility (assume 20 percent of staff will walk to work.):  
 $C \times 0.8 =$  [ ]

E. Total Staff Parking = (Line C or D, as applicable) [ ]

**(2) Patients and Visitors**

F. Inpatient Beds = [ ]

G. Annual Outpatient Visits \_\_\_\_\_  $\times 0.002 =$  [ ]

H. Annual Dental Minutes \_\_\_\_\_  $\times 0.00004 =$  [ ]

I. Total Patient and Visitor Parking =  $F + G + I =$  [ ]

**(3) Government Vehicles**

J. Professional and Technical Community Health Staff = [ ]

K. General Use Vehicles = [ ]

L. Total Government Vehicles =  $J + K =$  [ ]

**(4) Other Vehicles (Bus, etc.)**

M. Additional parking for vehicles such as buses. A minimum of one bus space is to be provided per facility. Justification is required for more spaces. [ ]

N. Total parking spaces for facility =  $E + I + L + M =$  [ ]

**e. Uncovered outside storage area(s).** [ ]

**f. Helicopter (port/pad).** [A daylight operation only helicopter landing pad or An all weather full time operation heliport] shall be provided near the health facility to support the [IHS or tribal] EMS program and the IHS health care delivery system for this region. Federal Aviation Administration (FAA) standards are to be followed for siting, size, and construction of the [landing pad]

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or **heliport**], to ensure proper guidance is followed for the clear air approaches, prevailing winds and navigational aids for the helicopters. The FAA office having jurisdiction for the site should be consulted for this guidance. Report actual size of helicopter facility.

g. Building overhang(s) exceeding one meter in width. [     ]

h. Unroofed equipment pad(s). [     ]

i. Covered entrances(s). All entrances are to be covered and handicapped accessible.

(1) Main Entrance. The main entrance will be located and oriented sensitive to the local culture. Primarily, it is to serve all patients and visitors. As applicable, wind breaks are to be provided.

(2) Ambulance/Emergency Entrance. {For health care facilities that have an emergency room.} Separate covered entrances are to be provided for the emergency room, one for emergency ambulance service and one for walk-in service. The covered area for the ambulance service is to be at the proper height to allow clearance of proposed vehicles including radio antennae, and completely protected from the elements. Level access is to be provided, with no steps or dock being used.

(3) Community Health Entrance. A separate entrance is to be provided for the Community Health Services. This entrance will be used by staff for loading equipment and supplies and by wheel chaired patients.

j. Outdoor Waiting Area. As applicable, suitable outdoor waiting areas are to be provided for use by patients, dependants, and visitors. For children, play areas are to be considered. The location of these areas should consider the availability of shade, quietness for the users as well as occupants of the building, location relative to roads and parking areas, and the ground cover. {Specify the number and size of areas to be provided.}

k. Traditional Healing Structure. {For inpatient health care facility only, as locally specified.} {Specify the space to be provided.}

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**D. CRITERIA**

**1. Introduction.** The design criteria reflect the work of an advisory group from OES/HRSA and IHS Facilities Management. Work group members reviewed previously written design criteria documents with the single purpose of developing and/or adopting existing health facility design criteria necessary to accommodate current health care procedures and to provide a desirable environment for patient care at a reasonable facility cost at all newly designed IHS health care facilities. Further, the intent is to utilize the most up-to-date accepted codes and standards of the health facilities industry. Design innovations are encouraged.

**2. Design Criteria**

**a. Available Sources.** Federal and industry standards (latest editions) are adopted as design criteria for IHS facilities. All previous issuances prescribing design criteria for IHS facilities are rescinded.

**b. Primary Criteria.** The current edition of the American Institute of Architects (AIA) Guidelines for Construction and Equipment of Hospital and Medical Facilities is adopted as the primary standard for health facility design criteria. Standards adopted herein will supplement but not supplant criteria contained within this publication unless stated specifically.

**c. Supplanting Criteria.** The following standards of issuances shall be used in lieu of those cited above:

- C IHS and ES/OEHE/IHS Technical Bulletins
- C OASH Technical Bulletin
- C NFPA & Appendices
- C Computer-Aide Design (CAD) "Layer Guidelines", compatible with Auto CAD

**d. Supplementing Criteria.** The following standards or issuances will be used as guides in making decisions which deviate from or are not covered in the latest edition of the AIA Guidelines for Construction and Equipment of Hospital and Medical Facilities.

- C OSHA
- C HFPM Volume II
- C IHS and ES/OEHE/IHS Bulletins

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- C NOAA Climatological Data
- C IHS HVAC guidance
- C IHS Lighting guidance
- C Chapter 4.1, PHS Facilities Manual, Vol 1, Transmittal 88.1
- C Measurements in accordance with GSA standards
- C State and local codes and standards
- C FAA Standards for helipads

**e. Criteria Updating or Issuance of New Criteria.**

Current editions of basic criteria referenced above shall be used for design of new facilities. Basic criteria changes occurring during design of a project will be applied to the extent it is practical.

**f. Handicapped Accessibility Requirements.**

For IHS construction projects, two slightly different standards exist for the design criteria requirements for handicapped accessibility, the Uniform Federal Accessibility Standards (UFAS) and the Americans with Disabilities Act (ADA). The ADA is the more recent of the two, with the UFAS applying only to Federal facilities. In accordance with the IHS Health Facilities Advisory Committee (HFAC) 1-3.11 Decision No. D-11 - Handicapped Accessibility, adopted on June 1, 1994, the ADA, as provided in the 42 United States Code 12101, Title III Standards, will apply for all IHS health care facilities and staff quarters.

**E. PERFORMANCE REQUIREMENTS**

**1. Health Departments Relationships.**

Space relationships are diagramed for each of the departments. The facility will have a comprehensive health care delivery program including ambulatory services, as well as community health services. The attached functional diagrams are intended to describe functional activities only and, therefore, do not necessarily indicate individual spaces nor do they attempt to show accurate scale. They may include departments, services, or activities which are not included in this facility.

**2. Medical Supply Services System.**

(For inpatient facilities only.) Sterile items will be delivered via messenger and carted to the using units. Soiled items will be returned using different carts. Primary using units for this service are Delivery, Surgery, Acute Care Nursing, Emergency/Urgent Care, and Ambulatory Care.

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3. **Food System.** (For inpatient facilities only.)  
Diet orders will be sent from the requesting nursing units. Food delivery systems will consist of hot/cold food carts delivered to the units three times daily. These same carts are returned to the dietary department after each meal with soiled trays.

4. **General Stores Supply System.** Supplies will be delivered via carts to appropriate units.

5. **Linens.** Clean linen will be delivered via carts to the appropriate units from Central Housekeeping Stores.

6. **Solid Waste Disposal System.** Solid waste will be collected in appropriately labeled and/or color coded bags, sealed and picked-up by housekeeping staff, at least once daily, all as specified in the 54.0 Housekeeping Unit Concept of Operations, which contains the procedures for handling, collection and temporary storage of all solid waste, until it is disposed of by the applicable Environmental Protection Agency (EPA) or applicable state or local regulations, whom ever has jurisdiction, either through incineration or by hauling away from the facility, which ever is applicable.

7. **Hazardous Medical Waste Disposal System.** Hazardous medical waste will be collected in appropriately labeled and/or color coded plastic bags, sealed and picked-up by housekeeping staff, at least once daily, all as specified in the Concept of Operations for the 54.0 Housekeeping Unit, which contains the procedures for handling, collection, and temporary storage of hazardous medical waste until is hauled away from the facility, in compliance with the EPA, or applicable state or local requirements, whom ever has jurisdiction.

8. **Inpatient Pharmacy System.** (For inpatient facilities only.): The unit dose cart will be prepared in accordance with the pharmacist's review of the inpatient charts. Delivery of these items will be on a unit dose cart exchange system. A separate cart on each nursing unit will be prepared for each period of nursing coverage. Active carts will be kept at the medication alcove under the supervision of the nursing staff. In addition, the pharmacy will provide distilled water to departments requiring it.

9. **Outpatient Pharmacy System.** Drug dispensing will be provided on a pharmacy consultation basis with each patient meeting the pharmacist privately for instruction concerning the administration of medications. The pharmacist will fill

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prescriptions from the patient's health record. Pre-packaged drug items for field health clinic operations will be prepared by the outpatient pharmacy. Orders from dental and pathology are small quantities which will not generate cart traffic. Bulk drugs will be delivered directly to the pharmacy.

**10. Patient Call System.** A patient call system should be included for calling patients from waiting areas to treatment areas and services. The outpatient department exam rooms and nurses work station, pharmacy, laboratory, X-ray, and medical records need to call patients. This system can be part of the total facility paging system, but must capable of operating separately. An emergency call system for dental exam rooms is required.

**11. Medical Records System.** The primary concern is the delivery of medical records to and from various departments. Consideration should be given to the flow of records within the facility. A central dictating system shall be provided to facilitate recording of medical information onto patient medical records. The system should provide for physicians to dictate to the central location from exam rooms and offices.

**12. Water System.** The water supply shall include an alternate source to meet the emergency supply requirement per applicable standards and codes. A reverse osmosis unit for distilled water should be provided within the facility with a tap in the pharmacy.

**13. Emergency Electrical System.** Alternate electrical power is to be provided in accordance with the IHS Technical Handbook for Health Facilities, Volume III, Part 7, Chapter 1, "Alternate Power for Health Facilities." The content of this guidance states that alternate electrical power is to be provided in accordance with NFPA 99, Chapter 13. IHS HQ approval is required for any device and load in addition to that specified in these documents. Once the authorized load is determined, the proper sized generator is to be provided.

**14. Physical Plant Security.** Depending on the personnel loading and area of the health care facility, appropriate security is to be provided in compliance with the June 28, 1995, President of the United States Memorandum for Executive Departments and Agencies, Subject: Upgrading Security at Federal Facilities. At a minimum, physical plant security monitoring system is to be installed to monitor controlled areas and all entrances to the health

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care facility. In addition, areas such as central supply and pharmacy shall have alarm systems to provide additional protection of these areas.

**15. Communication Equipment.** Two-way radio communications are used by some ambulatory care departments and by the tribal EMS function. All two-way radio communications functions will be installed at this facility in accordance with the current Federal Communications Commission (FCC) regulations. Local requirements will be provided to the designer by the Service Unit Director.

**16. Preventive Maintenance Program.** The Indian Health Service "Facilities Management Program" will develop a preventive maintenance program for this facility.

**17. Systems Monitoring and Control.** A computerized system shall be used for equipment monitoring and control, lighting control, peak load shedding, fire alarm, fire suppression, security, exhaust systems, HVAC systems, emergency generation of power, air alarms, water softening, and autoclave monitoring. For the portable medical gases, independent alarms will be provided by the vendor in accordance with applicable regulations.

**18. Biomedical Equipment.** All contractor installed medical equipment shall be provided with three copies of service, maintenance, parts, and operation manuals; plus installed ("as-built") drawings and schematics. In the layout design, adequate space shall be allowed for the installation of fixed equipment.

The A/E shall include in the construction specifications a training schedule for the maintenance personnel. The Government reviewer shall assure that the training specifications are reviewed before final acceptance of the facility.

**19. Fire Suppression System.** To conform with applicable codes, a fire suppression system shall be provided for the entire health facility.

**20. Building Maintenance Accessibility.** The design of the health center is to consider the maintainability of the facility in the provision of accesses for the servicing and repair of the utility systems and built-in fixed equipment. No accesses are to be placed in the way of any operation or preclude the use of any room, space or corridor.

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21. Utilities Distribution on Project Site. On this project site, all utilities are to be distributed [underground, at the proper depth for the regional weather conditions, or overhead,] in accordance with applicable codes and regulations. Where feasible, utility lines are to be placed in the road right-a-ways.

22. Elevator(s). {If the health care facility has more than one floor, specify the number of elevators to be provided.} A minimum of [Number] elevator(s) [is/are] to be provided, sized and equipped to transport passengers, medical patients on gurneys, and cargo between the building levels.

23. Energy Efficiency and Water Conservation. The design is to meet the requirements of Executive Order 12902 - "Energy Efficiency and Water Conservation at Federal Facilities." The design is to minimize the life cycle cost by utilizing energy efficiency, water conservation, or other renewable energy technologies. The design is to meet or exceed the applicable energy performance standards as set forth in 10 CFR 435 or by local building standards.

24. Environmentally Beneficial Landscaping. The design is to incorporate the requirements contained in the April 26, 1994, Presidential Memorandum on Environmentally and Economically Beneficial Practices on Federal Landscaped Grounds. Where cost-effective and to the extent practicable, regionally native plants are to be used; the construction practices used are to minimize adverse effects on the natural habit; pollution from the use of fertilizer, pesticides and pest management technics are to be prevented and or reduced to comply with the reduction goals established in Executive Order No. 12856 - "Federal Compliance with Right-To-Know Laws and Pollution Prevention Requirements;" and water-efficient practices and landscaping practices are to be followed to meet the requirements of Executive Order No. 12902 - "Energy Efficiency and Water Conservation at Federal Facilities."

25. Equipment. The Service Unit is to provide a generic equipment list, including any special requirements, for all equipment to be incorporated into this new facility. The designer is to determine the "best" equipment to meet the needs and provide a list of recommended equipment items for approval. The "best" is defined as the most economical, that will provide the longest use at minimal maintenance, and is maintainable. The designer is to provide detailed procurement specifications for approved equipment items, and a recommendation how the items are to be procured and installed, either (1) contractor furnished and installed, (2) Government



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furnished and contractor installed, or (3) Government furnished and installed. All procurement actions are to comply with the requirements contained in the current edition of Part 12 - Equipment Planning and Acquisition of the IHS Technical Handbook for Health Facilities, Volume II - Facilities Planning.

#### IV. STAFF QUARTERS

**A. INTRODUCTION.** This document defines the design and construction requirements for the **[new/replacement/renovated]** staff quarters to support the health facility in this project.

##### B. DESIGN AND CONSTRUCTION REQUIREMENTS

**1. AUTHORIZED UNITS, ROOMS, AND SPACE.** In compliance with the OMB Circular No. A-45 (Revised October 20, 1993), the following tables show the authorized number and type of units and the number and type of rooms for the authorized floor areas for the quarters to be provided for this project. The net floor area shown is defined as the authorized space inside exterior or party walls, excluding spaces for service, storage, mechanical equipment and garage/carport. For the **[Number]** **{Specify the number of units to be handicapped accessible in compliance with the UFAS.}** units to be designed and constructed for adaptability for handicapped accessibility, the sizes of affected rooms are to be adjusted and increased to comply with the UFAS.

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**TABLE I - NEW STAFF QUARTERS TO BE CONSTRUCTED**

| TYPE                           | NUMBER<br>OF BEDROOMS | NUMBER OF RENTAL<br>UNITS        | NUMBER OF<br>TRANSIENT UNITS     |
|--------------------------------|-----------------------|----------------------------------|----------------------------------|
| Single-Family                  | 2                     | [No.]                            | [No.]                            |
|                                | 3                     | [No.]                            | [No.]                            |
|                                | 4                     | [No.]                            | [No.]                            |
| Subtotal Single-Family         |                       | [No.]                            | [No.]                            |
| Multiple-Family                | 1                     | [No.]<br>([No.] -<br>Quadplexes) | [No.]<br>([No.] -<br>[size]plex) |
|                                | 2                     | [No.]<br>([No.] -<br>Duplexes)   | Not Authorized                   |
| Subtotal Multiple-Family       |                       | [No.]                            | [No.]                            |
| Subtotals                      |                       | [No.]                            | [No.]                            |
| Total New Staff Quarters Units |                       |                                  | [No.]                            |

**TABLE II - AUTHORIZED NUMBER OF ROOMS AND SIZES**

| ROOM DESCRIPTION              | SF<br>2 BR<br>(1)<br>(12) | SF<br>3 BR<br>(1)<br>(12) | SF<br>4 BR<br>(1) | MF<br>1 BR<br>(2) | MF<br>2 BR<br>(3) | TQ<br>1<br>BR<br>(4)<br>(12) |
|-------------------------------|---------------------------|---------------------------|-------------------|-------------------|-------------------|------------------------------|
| Entrance Vestibule            | X                         | X                         | X                 | X                 | X                 | X                            |
| Coat Closet                   | X                         | X                         | X                 | X                 | X                 | X                            |
| Kitchen (5)                   | X                         | X                         | X                 | X                 | X                 |                              |
| Kitchen/Dining Area (6)       |                           |                           |                   |                   |                   | X                            |
| Dining Room                   |                           | X                         | X                 |                   |                   |                              |
| Dining Room / Living Room (7) | X                         |                           |                   | X                 | X                 |                              |
| Living Room                   |                           | X                         | X                 |                   |                   | X                            |
| Family Room (Den)             | X                         | X                         | X                 |                   | X                 |                              |

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| ROOM DESCRIPTION                            | SF<br>2 BR<br>(1)<br>(12) | SF<br>3 BR<br>(1)<br>(12) | SF<br>4 BR<br>(1) | MF<br>1 BR<br>(2) | MF<br>2 BR<br>(3) | TQ<br>1<br>BR<br>(4)<br>(12) |
|---|---------------------------|---------------------------|-------------------|-------------------|-------------------|------------------------------|
| Master Bedroom (8)                          | X                         | X                         | X                 | X                 | X                 |                              |
| Clothes Closet                              | X                         | X                         | X                 | X                 | X                 |                              |
| Clothes Closet                              | X                         | X                         | X                 | X                 | X                 |                              |
| Master Bath Room                            |                           | X                         | X                 |                   |                   |                              |
| Master Bath Room Linen Closet               |                           | X                         | X                 |                   |                   |                              |
| Bedroom No. 2 (8)                           | X                         | X                         | X                 |                   |                   | X                            |
| Clothes Closet                              | X                         | X                         | X                 |                   |                   | X                            |
| Clothes Closet                              | X                         | X                         | X                 |                   |                   |                              |
| Bedroom No. 3 (8)                           |                           | X                         | X                 |                   |                   |                              |
| Clothes Closet                              |                           | X                         | X                 |                   |                   |                              |
| Clothes Closet                              |                           | X                         | X                 |                   |                   |                              |
| Bedroom No. 4 (8)                           |                           |                           | X                 |                   |                   |                              |
| Clothes Closet                              |                           |                           | X                 |                   |                   |                              |
| Clothes Closet                              |                           |                           | X                 |                   |                   |                              |
| Bath Room No. 2                             | X                         | X                         | X                 | X                 | X                 | X                            |
| Linen Closet                                | X                         | X                         | X                 | X                 | X                 | X                            |
| AUTHORIZED NET FLOOR AREA (m <sup>2</sup> ) | [ ]                       | [ ]                       | [ ]               | [ ]               | [ ]               | [ ]                          |
| Halls                                       | X                         | X                         | X                 | X                 | X                 | X                            |
| Laundry Room                                | X                         | X                         | X                 | X                 | X                 | X                            |
| Mechanical Equipment Room (9)               | X                         | X                         | X                 | X                 | X                 | X                            |
| Storage Room (Inside) (10)                  | X                         | X                         | X                 | X                 | X                 | X                            |
| Carport, one car                            |                           |                           |                   |                   |                   | X                            |

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| ROOM DESCRIPTION                              | SF<br>2 BR<br>(1)<br>(12) | SF<br>3 BR<br>(1)<br>(12) | SF<br>4 BR<br>(1) | MF<br>1 BR<br>(2) | MF<br>2 BR<br>(3) | TQ<br>1 BR<br>(4)<br>(12) |
|---|---------------------------|---------------------------|-------------------|-------------------|-------------------|---------------------------|
| Garage (unheated)                             | X                         | X                         | X                 | X                 | X                 |                           |
| Storage Room (Outside) (unheated) (11)        | X                         | X                         | X                 | X                 | X                 |                           |
| Net to Gross Conversion Factor                |                           |                           |                   |                   |                   |                           |
| AUTHORIZED GROSS FLOOR AREA (m <sup>2</sup> ) | [ ]                       | [ ]                       | [ ]               | [ ]               | [ ]               | [ ]                       |

Notes:

- (1) Single family units.
- (2) Multiple family quarters to be provided in the form of quadplex units.
- (3) Multiple family quarters to be provided in the form of duplex units.
- (4) Transient quarters to be provided in the form of a triplex unit.
- (5) Full sized kitchen. See Full Kitchen in GENERAL REQUIREMENTS for description of full sized kitchen.
- (6) Reduced sized kitchen combined with dining area. See Kitchen/Dining Area in GENERAL REQUIREMENTS for description of reduced sized kitchen/dining area.
- (7) Dining space and living room space in a combined area with no wall between the two spaces.
- (8) Two clothes closets are to be provided in each bedroom.
- (9) The mechanical equipment room is for the inside components of the HVAC equipment, electrical panels, etc.
- (10) The inside storage room is to contain space for an upright freezer and shelving for a food pantry and general storage. The minimum size of this room for a 1-bedroom unit is 4 m<sup>2</sup>; whereas, for all other units, the minimum size is to be 5 m<sup>2</sup>.
- (11) The outside storage room is to be unheated and contain space for lawn maintenance equipment and shelving for general storage. This storage room is to be contiguous to the provided carport or garage. Minimum size of this room is to be 3 m<sup>2</sup>.
- (12) One 2-bedroom single-family unit, one 3-bedroom single-family unit, and one 1-bedroom transient unit are to be adaptable for handicapped accessibility (HC). This means needed ramps, adjustable level counters, wider doorways and halls and larger bathrooms will be provided in these three units. Accordingly, the authorized net floor area for these three units will exceed that shown in this table by the space needed to comply with the HC space requirements.

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**2. GENERAL REQUIREMENTS**

**a. Billing for Utilities.** As indicated in the "OMB Circular A-45," to carry out Government policy to minimize energy consumption, wherever possible, occupants of Government rental quarters will be required to pay for the actual cost of utilities. Accordingly, for this project, private utility companies will furnish and bill the occupant directly for water, sewerage disposal, electricity, propane and or liquid petroleum gas (LPG), and telephone. Cable television will be Government furnished.

**b. Full Kitchen.** Each unit shall be provided with space and utility service connections for a full sized cooking range and oven (stove), built-in microwave oven, refrigerator, dishwasher, and garbage disposal. Floor to ceiling cabinets and counter space are to be provided.

**c. Kitchen/Dining Area.** Transient quarters are to be provided with an apartment sized reduced sized kitchen, which will have a dining area as a part of this space. This reduced sized kitchen will have all the appliances specified for the full kitchen, except the cooking stove, counter area and cabinets are to be reduced in size.

**d. Laundry Room.** Each unit shall be provided with space and utility service connections for a clothes washer and clothes dryer. A utility sink is to be provided in this space also.

**e. Storage Rooms.** See Special Design and Construction Requirements for specific storage rooms requirements applying to this project. The inside storage room shall include space and utility service for an upright freezer.

**f. Appliances.** The cooking stove, refrigerator, clothes washer, clothes dryer, and freezer are to be stand-alone units and are to be Government-furnished, contractor installed. The microwave oven, dishwasher and garbage disposal are to be built-in and contractor-furnished, contractor-installed. All appliances are to be electric, except the cooking stove and clothes dryer are to be natural gas or LPG, whichever is available, if the utility charges are more favorable. The quality of all appliances is to be upper middle grade to ensure durability, serviceability and adequacy for intended use.

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**g. Communications Service**

(1) **Telephone Service.** Each unit is to be provided telephone service. Voice communication outlets are to be provided in the kitchen (one wall location), living area (one location), and the master bed room (one location), of each unit.

(2) **Television Service.** Each unit is to be provided television service, tied into the source provided for this site. (See Special Design and Construction Requirements section.) Television cable outlets are to be provided in the living area (two locations), family room (den) (two locations), and in the master bed room (two locations), of each unit.

**h. Fire Detection Systems.** To comply with Title I of the Fire Administration Authorization Act of 1992 (Public Law 102-522), ALL housing units are to be provided before occupancy with hard wired smoke detectors, installed in accordance with applicable NFPA standards.

**i. Fire Suppression Systems.** To comply with Public Law 102-522, all multi-family dwellings (three or more dwelling units under one roof; i.e., triplexes and quadplexes) are to be provided before occupancy with an automatic sprinkler system, installed in accordance with applicable NFPA standards. This is in addition to the smoke detectors requirement.

**j. Fire Hydrants.** Fire hydrants are to be provided in the housing area, spaced along the streets, all in conformance with applicable NFPA standards.

**k. Fencing.** A minimum one meter high fencing is to be provided for each housing unit yard. Gates are to be sized and position to allow proper access by service vehicles.

**l. Driveways.** Each two-bedroom unit and larger shall have paved driveways wide enough for two automobiles. The slope and or drainage of driveways are to be such to preclude flooding of the garage. Each one-bedroom unit is have a paved driveway wide enough for one automobile.

**m. Streets.** Paved streets in front of each housing unit are to be designed and constructed wide enough to allow parking on both sides of the street plus two lanes of traffic. The

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street layout shall preclude use of streets by vehicles not required in the housing area.

n. **Roads.** All roads in the housing area, other than the streets in front of housing units, are to be wide enough for two lanes of traffic only.

o. **Sidewalks.** Paved sidewalks are to be provided along both sides of all streets in the housing site. As required to provide safe walking from the housing site to the health care facility, sidewalks are to be provided either along the housing access roads or over terrain whichever provides the best route between the housing site and the health care facility site.

p. **Housing Site Recreational Area.** The housing site is to include a centrally located recreational area for use by the residents. This area is to include six 8-person picnic tables, six 3-person benches, playground equipment for all ages children, a full sized hard surfaced tennis court, a volleyball court, and a half-court hard surfaced basketball court. The surface materials are to be proper for the type of sport specified.

q. **Site Expansion Planning.** The site master plan shall be developed to allow expansion of the housing area by a minimum of 50 percent.

r. **Exterior Finishes.** The color, texture, durability and cleanability of materials to be used for exterior finishes are to require minimum maintenance. They are to be installed to allow easy repair and or replacement, being easy to match. Special attention should be paid to energy conservation, wind-driven rain, and snow/water/ice release from roofs. The overall design and selection of exterior materials are to be compatible with existing buildings in the community.

s. **Interior Finishes.** The color, texture, durability and cleanability of interior finishes are to require minimum maintenance. They shall allow easy repair and or replacement, and be easy to match. Cabinets and shelving are to be durable, serviceable and adequate in size for their intended use. Floor coverings are to be of excellent quality to ensure wearability, cleanability, and durability.

t. **Interior Layouts.** Interiors are to be designed efficiently to accommodate built-in cabinets, pantries, baths, and closets. Locations for appliances are to consider usage

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traffic flow, door swings and serviceability. The wall locations of electrical, telephone and television outlets are to consider possible locations of occupant provided furniture. The room sizes for the kitchen, dining area, living room and family room are to consider the programmed occupancy for the unit. Likewise, the programmed occupancy is to be considered when sizing linen closets, clothes closets and storage rooms.

**u. Noise Levels.** As a minimum in multiple family units, walls separating units are to have a Sound Transmission Class (STC) rating of 55, and shall be of double wall construction. Walls between living and sleeping spaces are to be constructed to preclude transmission of noise.

**v. Energy Conservation.** The design shall reflect the Government's effort to operate new facilities with significantly less energy consumption, when compared with facilities designed prior to 1975. Attention is to be given to the orientation of the housing site and housing units relative to prevailing winds and the sun; the amount of insulation in floors, walls and ceilings; the type and quantity of window areas; and energy-saving lighting, heating, cooling, ventilation and major appliances. Attention is to be given to proper barriers and protection to prevent infiltration at penetrations of wiring, fixtures, etc. Infiltration barrier paper is to be used between the exterior wall covering and the exterior sheathing. Proper ventilation systems are to be used to exhaust water vapors from interior spaces and to provide the minimum air changes recommended for comfort. Energy considerations and humidity levels are to be a part of the overall heating, ventilation and air conditioning (HVAC) design. The intent is for the housing unit to be a tight, energy efficient, and comfortable living unit, which will conform with the current state of the art building practices.

**w. Plumbing Fixtures and Trim.** Upper middle grade plumbing fixtures and trim are to be used to ensure serviceability and maintainability.

**x. Electrical Fixtures.** All electrical fixtures are to be upper middle grade to ensure serviceability and maintainability. Energy conserving fixtures are to be considered.

**y. Transient Staff Quarters.** In compliance with OMB Circular No. A-45, as revised on October 20, 1993, transient quarters are to be used for short-term occupancy, normally for 90 days or less. Accordingly, the housing unit for this purpose is to



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be configured as an efficiency type apartment. This unit is to include an entry area, including a coat closet; a reduced-size kitchen, combined with an eating space, having a table and chairs for four; a lounge-living room area, having a sofa, two overstuffed chairs, two end tables, one side table and one coffee table; one bedroom, large enough for a queen-sized bed, night stand, chest, dressing table, and walk-in clothes closet; one bathroom; a linen closet; laundry room; storage room/pantry; mechanical equipment room; and a one-car carport. The kitchen is to have reduced-size cooking range (stove), oven, built-in microwave oven, refrigerator, dishwasher, garbage disposal, and built-in cabinets and counter space. A freezer is to be provided in the storage room/pantry. Appliances are to be provided as specified in paragraph 3.b.(6) above. Transient staff quarters are to be furnished also with all specified dining area, living area and bedroom furniture, plus window treatments, vacuum cleaner, broom, mop, cooking pots and pans, cooking utensils, four-place setting of stainless steel dinnerware, bedding (sheets, pillow case, blanket and bed spread), linen (bath towels, hand towels, wash clothes, dish towels, dish wash clothes, and insulated pot holders), television set, electric clock/radio/alarm, iron, ironing board, telephone instrument, and shower curtain; all of which will be Government-furnished, contractor-installed. This project only funds the initial outfitting of these items.

**3. SPECIAL JUSTIFICATIONS AND REQUIREMENTS**

**a. SPECIAL JUSTIFICATIONS**

(1) **Storage Areas.** Considering the remoteness of the site, extra storage space is authorized (reflected already in the authorized space) for large quantity purchases of food and supplies. **{This is to be used if site meets remoteness qualifications.}**

(2) **Family Room (Den).** Considering the lack of community facilities within reasonable commuting distances of this project site, space for recreation purposes is authorized for family units in the form of a family room (den) (reflected already in authorized space). **{This is to be used if site meets remoteness qualifications.}**

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(3) **Air Conditioning.** The weather conditions for this site support providing [type] cooling air conditioning units for each quarters unit. {Use this if site meets qualifications.}

(4) **Handicapped Accessibility.** To comply with the Uniform Federal Accessibility Standards (UFAS), five percent of any new construction is to be designed and constructed so the units can be adapted for use by handicapped occupants. This includes the provision of necessary ramps, proper sized doors, rooms, halls, and equipment, plus the provision of adjustable items to allow use by the handicapped and the non-handicapped, as assignments dictate. For this project, [No.] [size]-bedroom single-family unit, [No.] [size]-bedroom single-family unit and [No.] [size]-bedroom transient unit are to be adaptable for handicapped accessibility.

(5) **Transient Quarters.** Considering the concept of operations, there is a need for [No.] transient quarters at this health facility. Transient quarters are used to house students in the fields of medicine, nursing, pharmacy, physical therapy, and laboratory during short term rotations at the facility. Transient quarters will be used also by physicians in locum tenens. All occupancies of transient quarters would be for 90 days or less, and the occupancy rate is expected to be 90 percent or higher. The practice of having students participate in the health care at IHS health care facilities on the [Name of reservation] has been on-going for several years. When substitute health care providers are needed, transient quarters must be available at this remote site. {Use if site meets remoteness qualifications.}

**b. SPECIAL REQUIREMENTS**

(1) **Heating System.** Each unit is to be provided with a central forced air gas type heating system, with floor registers. {Revise as required to meet local conditions and requirements.}

(2) **Cooling System.** Each unit is to be provided with a central forced air (swamp) evaporative roof mounted cooling system with high side wall registers. {Revise as required to meet local conditions and requirements.}

(3) **Attic and Crawl Space.** Attic and crawl spaces are to be used only for heating and cooling systems ductwork (all insulated) and are to be vented to the outside. Each of these

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spaces is to be accessible for maintenance personnel. {Use if applicable.}

(4) Insulation. The minimum insulation for walls shall be rated R-20 and ceilings rated R-30. All windows are to be insulated. Exterior doors are to be insulated steel construction. {Revise to reflect local requirements.}

(5) Satellite Television System. For this project, a central satellite television antenna will be provided for a television system that is to provide entertainment channels distributed to each quarters unit. This system is to be contractor furnished and installed. {Revise to reflect local conditions and requirements.}

(6) Landscaping. Considering the dry climate for this site and noting that the existing vegetation is mostly small brush, tumbleweed, and other plant life that can subsist on minimal water, the landscaping for the housing area shall be designed and constructed using regional indigenous plantings. Irrigation systems normally should not be included in this project. Means to reduce dust as much as possible need to be addressed. The Environmentally Beneficial Landscaping paragraph in the **PERFORMANCE REQUIREMENTS** subpart of the health care facility portion of the POR, applies also. {Revise to reflect local conditions and requirements.}

(7) Site Adaptation of Previous Quarters Designs. Prior to commencement of a new quarters design, the Director, Engineering Services - [Dallas/Seattle], Office of Environmental Health and Engineering, IHS, is to review all applicable previous designs to determine those that are candidates for site adaptation for this project, and submit any such designs for IHS Headquarters approval.

**4. CODES AND STANDARDS.** Design and construction of new staff quarters will conform to the latest edition of the following identified codes and standards:

- ! Executive Office of the President, Office of Management and Budget (OMB), Circular No. A-45, Revised October 20, 1993.
- ! Public Health Service (PHS) Quarters Management Handbook, August 1990. Three chapters of this handbook deal with requirements and standards for new construction:

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- Chapter 5, "Provision of Household Effects" - Describes the provision of appliances, furniture, and other household effects.
  - Chapter 6, "Quarters Standards" - Describes construction standards and policies (e.g., location, physical layout, minimum amenities, etc.) for new family housing.
  - Chapter 8, "Construction of Housing" - Provides space-related and construction standards (e.g., types of dwellings to be constructed, rent and utility considerations, number of rooms, net area of houses, special features, energy metering, etc.).
- ! "Americans with Disabilities Act (ADA). (For IHS construction projects, two slightly different standards exist for the design criteria requirements for handicapped accessibility, the Uniform Federal Accessibility Standards (UFAS) and the Americans with Disabilities Act (ADA). The ADA is the more recent of the two, with the UFAS applying only to Federal facilities. In accordance with the IHS Health Facilities Advisory Committee (HFAC) 1-3.11 Decision No. D-11 - Handicapped Accessibility, adopted on June 1, 1994, the ADA, as provided in the 42 United States Code 12101, Title III Standards, will apply for all IHS health care facilities and staff quarters.)
- ! "Uniform Building, Plumbing and Mechanical Codes."
- ! "One and Two Family Dwelling Code," by the Council of American Building Officials.
- ! General Services Administration (GSA) "Metric Design Guide," latest edition (Third Edition, October 1993).
- ! "National Fire Codes," containing compilation of National Fire Protection Association (NFPA) Codes, Standards and Recommended Practices and Guides.